BEST AVAILABLE C

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

10/564837 APPLICANT(S)

CLAIMS

		ILED	AFTER 1°AMENDMENT		AFTER 3"AMENDMENT			AS FILED		AFTER Camendment		AFTER 2 AMENDMENT	
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TOTAL CLAIMS							TOTAL CLAINS			30			